CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

## **REQUIREMENTS**

- A. Adult and minor parents in an assistance unit are subject to substance abuse requirements when eligibility is determined, which includes:
  - 1. Answering questions that screen for substance abuse at the local department
  - 2. Signing a substance abuse consent for release of information form at the local department
  - 3. Participating in a more comprehensive assessment if substance abuse is indicated in the screening
  - 4. Enrolling in and maintaining attendance in a treatment program, if abuse is indicated
- B. Case manager using **DHR/FIA-1177** form refer to the addiction specialist all the following individuals in the assistance unit for substance abuse screening as part of the assessment during the application process
  - Adults
  - 2. Minor parents, regardless of age, including those who are:
    - Heads of household
    - Children

**Note:** Do not apply substance abuse sanctions to non-parent caretaker relatives in the assistance unit.

- C. Require each individual who is screened to sign the **DHR/FIA-1176** "Consent for the Release of Confidential Alcohol and Drug Treatment Information"
  - This form gives the Managed Care Organization (MCO), Primary Care Providers (PCP), Behavioral Health Organization and Treatment Providers authority to release substance abuse information from the individual's medical record
  - 2. The form is signed at initial application
    - It remains valid as long as the case is active
    - New forms must be signed if the case closes and re-opens
  - 3. Keep the original in the case record, the addiction specialist forwards a copy to an assessor and when appropriate to a treatment provider

Issued: February 1, 2001	Page 1
--------------------------	--------

CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

- D. After initial application, using the **DHR/FIA-1177** form refer to the addiction specialist for substance abuse screening, signing of the **DHR/FIA-1176** 
  - 1. An adult that has not been screened enters the home and is added to the assistance unit.
  - 2. A minor parent who has not been screened enters the home, or
  - 3. A child in the unit becomes a minor parent
- E. While the individual is in treatment, the local department case manager:
  - 1. Keeps the individual in the assistance unit as long as he/she is actively enrolled and complies with the program
  - 2. Authorizes normal certification periods with interim follow-up appointments every 4 months

# **PENALTIES**

- A. Impose the following penalties if the individual is non-cooperative and refuses to sign the **DHR/FIA-1176**:
  - 1. Deny the case if the adult or minor parent head of household fails to sign
    - Applies if either parent in a two-parent family refuses to sign
  - 2. Do not include the individual's needs in the benefit amount if the minor parent, who is a child in the assistance unit, fails to sign

**Note:** The same penalties apply if an individual, who was not previously screened, becomes subject to the provisions and refuses to sign.

- B. Impose an individual sanction for non-cooperation if the individual fails to participate in:
  - A more comprehensive assessment, or
  - 2. Treatment
- C. If the case is active, before applying a sanction:
  - Initiate the 30-day conciliation period if it is the first instance of noncompliance

Issued: February 1, 2001	Page 2

CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

- 2. Investigate reasons for non-compliance in all instances
- D. Assign a protective payee if the sanctioned individual is head of household
- E. Make a referral to Social Services if the individual is sanctioned for failure or refusal to participate

### SUBSTANCE ABUSE SCREENING

- A. During the application refer all adults and minor parents to the addiction specialist to assess if there may be a problem with substance abuse
- B. Require adults and minor parent heads of household to participate in a face-toface interview
- C. Minor parents who are not head of household and attend school full-time may be excused from the face-to-face interview if the local department:
  - 1. Includes the screening questions in the family responsibility plan, which is signed by the minor parent, and
  - 2. Has the minor parent sign the **DHR/FIA-1176**
  - 3. Informs the minor parent of the substance abuse requirements and penalties
- D. The addiction specialist will use screening instruments approved by the addictions agency
- E. If the screening questions indicate that there is substance abuse, the individual self identifies and requests a referral for treatment or is already in treatment, or there are other indications:
  - 1. The addiction specialist conducts or refers the individual for a comprehensive assessment
    - Individuals who are not enrolled in an MCO are referred to local county assessors
    - Forward the original of the DHR/FIA-1176 and DHR/FIA-1177 to the case manager to be maintained in the case record and when appropriate send a copy of the DHR/FIA 1176 to the assessor or treatment provider
  - 2. If the individual is in an emergency situation, such as pregnancy, or requests an immediate referral:

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CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

- Contact the person authorized to schedule emergency appointments if the individual is in an MCO or the treatment provider the individual request to be referred to
- Contact the Alcohol and Drug Abuse Administration County Coordinator to find a treatment provider if the individual is not yet MA approved and in an MCO
- 3. The addiction specialist determines with treatment provider if work activities are appropriate
- 4. If otherwise eligible, give the family a normal certification period, and make interim appointments every 4 months to follow-up with the treatment referral

## LOCAL DEPARTMENT / TREATMENT PROVIDER INTERACTION

- A. The case manager:
  - 1. informs each person screened about the requirements and penalties
  - 2. Completes a **DHR/FIA –1177** to refer all adults and minor parents in the assistance unit for substance abuse screening with the addiction specialist
  - 3. Collaborate with customer and addiction specialist on customers Independence Plan when substance abuse is indicated
  - 4. Denies the case or individual (as stated in Penalties) for refusal to sign **DHR/FIA -1176**
  - 5. Sanction case when individual fails to comply when in treatment
- B. The Addiction Specialist:
  - 1. Screens each adult parent and minor parent
  - 2. Obtains a signed **DHR/FIA-1176** from each person
  - Completes a DHR/FIA-1177 indicating results of the screening of each person
  - 4. Sends a copy of the **DHR/FIA-1176** and, **DHR/FIA-1177** to the case manager
  - 5. Send a copy of the **DHR/FIA1176** and **DHR/FIA -1178** to the treatment provider
  - 6. Confer with treatment provider on status of individual
  - 7. Notify case manager via the **DHR/FIA-1178** when individual is not in compliance

Issued: February 1, 2001	Page 4
•	

CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

- 8. Notify case manager when individual is able to work
- Receives information from the treatment providers via the DHR/FIA –
  1178-Substance Abuse Identification and Treatment Notification
- A. The Treatment Provider:
  - 1. Receives the **1178** referral and the **1176** consent forms
  - 2. Completes a copy of the **1178** within 30 days if the individual:
    - Failed to schedule or keep the initial appointment for treatment
    - Is awaiting an available vacancy
    - Is enrolled in a treatment program
    - Is not maintaining active attendance in the treatment program
    - Has successfully completed treatment
  - 3. Forwards the **1178** to the addiction specialist
  - 4. An **1178** can be completed several times for an individual as that person moves through the stages in the process
- B. The local department case manager as part of the recertification process:
  - 1. Verifies, according to local procedure, the treatment status through the addiction specialist for each individual in a treatment program
    - If otherwise eligible and in compliance with treatment, recertifies and sets up a 4-month follow-up appointment
    - If the individual is not in compliance, follows conciliation and sanction procedures

## **VERIFICATION**

• No verification is needed except for that contained on the 1178

### CASE MANAGEMENT TIPS

- A. Substance abuse treatment can be a work activity
  - 1. Participating in substance abuse treatment is a countable activity, as Job Search/Job Readiness for both the federal work participation rate (if the required hours are met) and without regards to hours the 24-month work requirement. Record in WOMIS using the JBT, Job Readiness Treatment, and activity code.

Issued: February 1, 2001	Page 5

CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

- 2. The addiction specialist and case manager work together with the customer to ensure that the individual's Independence Plan is consistent with the recommended substance abuse treatment plan
- When the 1177 indicates the individual screened positive, acknowledged a substance abuse problem, or is currently in treatment at application, do not refer the individual for up-front job search until an 1178 is received concerning work readiness
- 4. If the individual does not comply with substance abuse treatment, the individual substance abuse sanction takes precedence
- 5. The individual would have to be placed in and be non-compliant with another work activity for regular work sanctions to be imposed
- B. Give follow-up appointments every 4 months to cases with individuals that:
  - 1. Screen positive at the local department
  - Are self declared
  - 3. Indicate abuse at the initial interview
  - 4. Are referred for treatment
  - Are enrolled in treatment
- C. The 4-month follow-up appointments continue until treatment is successfully completed or the local department is notified by the addiction specialist that the individual no longer has a substance abuse problem

## **EXAMPLES**

- Example 1. Mary Smith receives assistance for herself and her 3 sons. She signed the **Form1176**. There were no substance abuse problems. Joseph Jones, father of the children, moves into the home and refuses to sign the **1176**.
  - Initiate the conciliation process
  - Send a notice of adverse action if conciliation is not successful and he still refuses to sign
  - Close the case at the end of the adverse action period
- Example 2. During recertification, the case manager learns that Ms. Lawson's 14-year-old daughter, Sally, has had a baby girl. Sally refuses to sign the **1176** even after the conciliation period. She is attending school full-time.
  - Remove Sally's needs from the assistance unit

	Issued: February 1, 2001	Page 6
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CHAPTER: IV	SECTION: 7	COMAR:
APPLICATION	SUBSTANCE ABUSE	07.03.03.04

Include phantom income equal to Sally's needs in the food stamp case

- Example 3. Molly Mason applies for assistance for herself and her minor nephews. She states that she has a drug problem and wants help. Ms. Mason is referred to a treatment program, but soon checks herself out.
  - Do not impose a sanction because Ms. Mason is a non-parent caretaker relative
  - A service referral may be appropriate
- Example 4. Nora Nelson applies for assistance for herself, daughter Nancy, age 16, and Nancy's 6-month old son.
  - Nora and Nancy are screened at the local department
  - Nora and Nancy each sign a 1176

Both Nora and Nancy are referred to a treatment for a comprehensive assessment. Nancy attends, but Nora continuously has excuses and still has not complied after conciliation

- Nora's needs are removed from the grant
- Phantom income is used for food stamp eligibility
- Nora must assign a representative payee

After 3 months, Nancy feels overwhelmed by parenthood and moves out of the house, but leaves her son with Nora

- Nora is no longer subject to sanction since she is now a non-parent caretaker relative
- Example 5. Melanie Melrose received assistance for herself and 3 children. She signed the **1176**. Ms. Melrose's case was subsequently closed effective March because she did not participate in her work activity. The case was re-opened in April, the first non-check month, when she began participating. Full benefits were issued for April
  - A new 1176 must be signed since the case closed and reopened
  - A referral to the addiction specialist is required for screening

## ADDITIONAL INFORMATION

- Sanctions Substance Abuse
- Work and Education Basic Requirements
- Assistance Unit Minor Parent

Issued: February 1, 2001	Page 7